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TO	Examiner Hal Wachsman
COMPANY	US Patent & Trademark Office
FAX NUMBER	17038729306
FROM	Mitchell Weatherly
DATE	2004-08-20 17:01:56 GMT
RE	Application No. 10/034,785; Atty Docket No. 03237.0001U2

COVER MESSAGE

Dear Sir/Madam:

Please accept the attached papers in connection with the above-referenced patent application and forward them to Examiner Hal Wachsman in Group Art Unit 2857.

The papers include:

Transmittal Form PTO/SB/21 (1 page);

Fee Transmittal Form PTO/SB/17 (1 page);

Form PTO-2038 for payment of \$475 in fees (1 page);

Amendment and Response (36 pages);

Replacement Drawing Sheet for FIG. 8-1 (1 page);

Petition for Extension of Time Form PTO/SB/22 (1 page);

Revocation of POA/Change of Address Form PTO/SB/82 (1 page);

Statement under 37 CFR 3.73(b) Form PTO/SB/96 (1 page).

Sincerely,

Mitchell G. Weatherly
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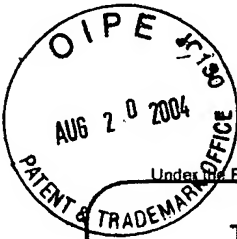
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/034,785
		Filing Date	December 27, 2001
		First Named Inventor	Lawrence J. Seigel
		Art Unit	2857
		Examiner Name	Hal Wachsman
Total Number of Pages in This Submission	43	Attorney Docket Number	03237.0001U2

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Mitchell G. Weatherly Weatherly & Associates, LLC
Signature	
Date	August 20, 2004

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Signature		Date	August 20, 2004

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